

CHECK DATE	CHECK NUMBER	PAGE
04/21/2017	128581	1 OF 2

VENDOR (100913) FIRST CITIZENS BANK

INVOICE NUMBER	INVOICE DATE	PO NUMBER	ACCOUNT NUMBER	DESCRIPTION	INVOICE AMOUNT
4472565264423206	04/03/17		358-000-5400	EMA	30.76
			100-355-5207	EMA	62.12
			358-000-5400	EMA	13.29
			358-000-5400	EMA	19.24
			360-017-5400	EMA	3.24
			360-017-5400	EMA	21.37
			360-017-5400	EMA	13.16
			358-000-5400	EMA	21.60
			358-000-5400	EMA	88.52
			358-000-5400	EMA	-21.27
			358-000-5400	EMA	32.05
			358-000-5400	EMA	358.30
			358-000-5400	EMA	89.85
					10,376.46

CHESTER COUNTY
P.O. Box 580
CHESTER, SC 29706

FIRST CITIZENS BANK
CHESTER, SC 29706
67-148/532

128581

DATE	AMOUNT
04/21/2017	*****10,376.46

PAY TEN THOUSAND THREE HUNDRED SEVENTY-SIX AND 46 / 100

TO THE FIRST CITIZENS BANK
ORDER P O BOX 63001
OF CHARLOTTE, NC 28263-3001

Thomas E. Dwyer

CONTINUED ON OVERFLOW PAGE(S)

See Reverse Side For Easy Opening Instructions

County of Chester
Operating Account
PO Drawer 686
Chester, SC 29706

FIRST CITIZENS BANK
P O BOX 63001
CHARLOTTE, NC 28263-3001

VENDOR (100913) FIRST CITIZENS BANK

CHECK DATE	CHECK NUMBER	PAGE
04/21/2017	128581	2 OF 2

INVOICE NUMBER	INVOICE DATE	PO NUMBER	ACCOUNT NUMBER	DESCRIPTION	INVOICE AMOUNT
4472565264423206	04/03/17		358-000-5400	EMA	64.79
			358-000-5400	EMA	60.75
			358-000-5400	EMA	43.19
			358-000-5400	EMA	32.37
4472565426868421	04/03/17		100-190-5224	SUPERVISOR	836.74
			311-000-5400	SUPERVISOR	3,167.61
4472565047459048	04/03/17	27457	100-301-5202	SHERIFF'S DEPT	5.80
			100-301-5202	SHERIFF'S DEPT	10.17
4472565047459048	04/03/17	27619	100-301-5202	SHERIFF'S DEPT	247.17
4472565047459048	04/03/17	27449	100-301-5207	SHERIFF'S DEPT	-451.76
4472565047459048	04/03/17		100-301-5207	SHERIFF'S DEPT	5,627.40

CONTINUED FROM CHECK 128581

10,376.46

VOID

County of Chester
Operating Account
PO Drawer 686
Chester, SC 29706

FIRST CITIZENS BANK
P O BOX 63001
CHARLOTTE, NC 28263-3001

VENDOR (100913) FIRST CITIZENS BANK

CHECK DATE	CHECK NUMBER	PAGE
04/21/2017	128581	2 OF 2

INVOICE NUMBER	INVOICE DATE	PO NUMBER	ACCOUNT NUMBER	DESCRIPTION	INVOICE AMOUNT
4472565264423206	04/03/17		358-000-5400	EMA	64.79
			358-000-5400	EMA	60.75
			358-000-5400	EMA	43.19
			358-000-5400	EMA	32.37
4472565426868421	04/03/17		100-190-5224	SUPERVISOR	836.74
			311-000-5400	SUPERVISOR	3,167.61
4472565047459048	04/03/17	27457	100-301-5202	SHERIFF'S DEPT	5.80
			100-301-5202	SHERIFF'S DEPT	10.17
4472565047459048	04/03/17	27619	100-301-5202	SHERIFF'S DEPT	247.17
4472565047459048	04/03/17	27449	100-301-5207	SHERIFF'S DEPT	-451.76
4472565047459048	04/03/17		100-301-5207	SHERIFF'S DEPT	5,627.40

CONTINUED FROM CHECK 128581

10,376.46

VOID

County of Chester
Operating Account
PO Drawer 686
Chester, SC 29706

FIRST CITIZENS BANK
P O BOX 63001
CHARLOTTE, NC 28263-3001



Name: K SHANE STUART
COUNTY OF CHESTER

PO BOX 1580
ROANOKE VA 24007-1580

Billing Cycle
Closing Date:
04/03/17

Account
Number: [REDACTED]

Account Summary

Beginning balance	\$886.53	Number of days in billing cycle	31
Payments and credits	886.53	Credit limit	15,000.00
Purchase and adjustments less refunds	4,004.35	Available credit	10,995.65
Cash advances	0.00	Available cash line	4,500.00
FINANCE CHARGES	0.00	Payment due date	04/28/17
Balance 04/03/17	\$4,004.35	NEW MINIMUM PAYMENT DUE	200.00

FOR INFORMATION PLEASE CALL: 888-514-6849
SEND INQUIRIES TO: FIRST CITIZENS BANK PO BOX 1580 ROANOKE VA 24007-1580

Page 1 of 2

TRANSACTIONS SINCE LAST STATEMENT

Trans	Post	Reference Number	Description	Amount
03/16	03/17	24755427075270752	CROWN TROPHY 037 FORT MILL SC	836.74
03/22	03/22	00000111	PAYMENT RECEIVED -- THANK YOU	886.53-
03/29	03/30	24707807088980150	48 hr books inc 330-375-9128 OH	3,167.61

TYPE OF BALANCE	MONTHLY PERIODIC RATE	CORRESPONDING ANNUAL PERCENTAGE RATE	AVERAGE DAILY BALANCE	PERIODIC FINANCE CHARGES
Purchases	0.721	8.65	0.00	0.00
Cash Advances	1.874	22.49	0.00	0.00

* Periodic Rate May Vary.

NOTE: See reverse side for Annual
Membership Fee disclosure.

Total Periodic FINANCE CHARGES: \$0.00
Total Transaction Charges: \$0.00
Total FINANCE CHARGES: \$0.00
ANNUAL PERCENTAGE RATE: 0.000%

NOTICE: SEE REVERSE SIDE FOR IMPORTANT INFORMATION



First Citizens Bank

PO BOX 1580
ROANOKE VA 24007-1580

Name: CHESTER COUNTY EMA
COUNTY OF CHESTER

Billing Cycle
Closing Date:
04/03/17

Account
Number: [REDACTED]

Account Summary

Beginning balance	\$260.57	Number of days in billing cycle	31
Payments and credits	281.84	Credit limit	5,000.00
Purchase and adjustments less refunds	954.60	Available credit	4,066.67
Cash advances	0.00	Available cash line	1,500.00
FINANCE CHARGES	0.00	Payment due date	04/28/17
Balance 04/03/17	\$933.33	NEW MINIMUM PAYMENT DUE	46.00

FOR INFORMATION PLEASE CALL: 888-514-6849
SEND INQUIRIES TO: FIRST CITIZENS BANK PO BOX 1580 ROANOKE VA 24007-1580

Page 1 of 4

TRANSACTIONS SINCE LAST STATEMENT

Trans	Post	Reference Number	Description	Amount
03/03	03/06	24073147064900019	COPPER RIVER OF COLUMBIA COLUMBIA SC	30.76
03/03	03/06	24755427062170629	EMBASSY KINGSTON PLANT MYRTLE BEACH SC	62.12
03/03	03/06	24431067063207088	WAFFLE HOUSE 0965 LEXINGTON SC	13.29
03/09	03/10	24060657068900011	SAMS EQUIPMENT & OUTDOOR 999-9999999 SC	19.24
03/14	03/16	24445007074100146	DOLLAR-GENERAL #1606 CHESTER SC	3.24
03/15	03/16	24445007075400120	WM SUPERCENTER #585 ROCK HILL SC	21.37
03/15	03/16	24445007075000683	BI-LO GROCERY #5288 CHESTER SC	13.16
03/16	03/19	24445007076100191	DOLLAR-GENERAL #3253 CHESTER SC	21.60
03/19	03/20	24445007079400137	WM SUPERCENTER #4593 ROCK HILL SC	88.52
03/20	03/23	74226387081360204	WAL-MART #1603 CHESTER SC CREDIT	21.27-
Order Date: 03/20/17				
03/20	03/21	24445007080400129	WM SUPERCENTER #1603 CHESTER SC	32.05
03/22	03/22	00000109	PAYMENT RECEIVED -- THANK YOU	260.57-
03/22	03/23	24060657081900013	LOGO WORKS INC 803-3273613 SC	358.30
03/22	03/24	246921670820000415	NORTHERN TOOL EQUIP-SC ROCK HILL SC	89.85
03/22	03/23	24445007082000715	TRACTOR SUPPLY CO #1743 CHESTER SC	64.79
03/24	03/26	24445007084400136	WM SUPERCENTER #1603 CHESTER SC	60.75
03/28	03/29	24755427086730882	THE WIRELESS COMPANY CHESTER SC	43.19
03/30	03/31	24445007090400127	WM SUPERCENTER #1603 CHESTER SC	32.37

NOTICE: SEE REVERSE SIDE FOR IMPORTANT INFORMATION



Name: ALEX UNDERWOOD
COUNTY OF CHESTER

PO BOX 1580
ROANOKE VA 24007-1580

Billing Cycle
Closing Date:
04/03/17

Account
Number: [REDACTED]

Account Summary

Beginning balance	\$597.62	Number of days in billing cycle	31
Payments and credits	1,049.38	Credit limit	10,000.00
Purchase and adjustments less refunds	5,890.54	Available credit	4,561.22
Cash advances	0.00	Available cash line	3,000.00
FINANCE CHARGES	0.00	Payment due date	04/28/17
Balance 04/03/17	\$5,438.78	NEW MINIMUM PAYMENT DUE	271.00

FOR INFORMATION PLEASE CALL: 888-514-6849
SEND INQUIRIES TO: FIRST CITIZENS BANK PO BOX 1580 ROANOKE VA 24007-1580

Page 1 of 4

TRANSACTIONS SINCE LAST STATEMENT

Trans	Post	Reference Number	Description	Amount
03/04	03/05	24692167063000838	UPS*293224DLA6C 800-811-1648 GA	5.80
03/04	03/05	24692167063000838	UPS*1ZJT599U0300007615 800-811-1648 GA	10.17
03/16	03/17	24692167075000239	EXPEDIA7252303400445 EXPEDIA.COM WA	380.00
03/16	03/19	24431067076344900	AMERICAN AIR0017956565630FORT WORTH TX	1,311.85
			Dept Date: 06/22/17 Orig. Airport: CLT Dest. Airport: ORD	
			Orig. Airport: ORD Dest. Airport: RNO	
			Orig. Airport: RNO Dest. Airport: PHX	
			Orig. Airport: PHX Dest. Airport: CLT	
03/16	03/19	24431067076344900	AMERICAN AIR0017956565631FORT WORTH TX	1,311.85
			Dept Date: 06/22/17 Orig. Airport: CLT Dest. Airport: ORD	
			Orig. Airport: ORD Dest. Airport: RNO	
			Orig. Airport: RNO Dest. Airport: PHX	
			Orig. Airport: PHX Dest. Airport: CLT	
03/16	03/19	24431067076344900	AMERICAN AIR0017956565632FORT WORTH TX	1,311.85
			Dept Date: 06/22/17 Orig. Airport: CLT Dest. Airport: ORD	
			Orig. Airport: ORD Dest. Airport: RNO	
			Orig. Airport: RNO Dest. Airport: PHX	
			Orig. Airport: PHX Dest. Airport: CLT	
03/16	03/19	24431067076344900	AMERICAN AIR0017956565633FORT WORTH TX	1,311.85
			Dept Date: 06/22/17 Orig. Airport: CLT Dest. Airport: ORD	
			Orig. Airport: ORD Dest. Airport: RNO	
			Orig. Airport: RNO Dest. Airport: PHX	

NOTICE: SEE REVERSE SIDE FOR IMPORTANT INFORMATION

TRANSACTIONS SINCE LAST STATEMENT

Trans	Post	Reference Number	Description	Amount
			Orig. Airport: PHX Dest. Airport: CLT	
03/22	03/22	00000110	PAYMENT RECEIVED -- THANK YOU	597.62-
03/27	03/29	24445007087200141	HOBBY LOBBY #383 ROCK HILL SC	247.17
03/29	03/30	74755427088170884	EMBASSY KINGSTON PLANT MYRTLE BEACH SC CREDIT	451.76-
			Purchase ID: 1020769	

TYPE OF BALANCE	MONTHLY PERIODIC RATE	CORRESPONDING ANNUAL PERCENTAGE RATE	AVERAGE DAILY BALANCE	PERIODIC FINANCE CHARGES
Purchases	0.721	8.65	0.00	0.00
Cash Advances	1.874	22.49	0.00	0.00

* Periodic Rate May Vary.

NOTE: See reverse side for Annual
Membership Fee disclosure.

Total Periodic FINANCE CHARGES:	\$0.00
Total Transaction Charges:	\$0.00
Total FINANCE CHARGES:	\$0.00
ANNUAL PERCENTAGE RATE:	0.000%

12050

Requisition Form

Requesting Department:	Shelby's Office	Date:	4-18-17
Vendor:	First Citizens Bank	Acct. #	100-301-52027

QTY	Unit of Meas	Item Number	Description	Unit Cost	(Purchasing use only)	Extended Cost	(Purchasing use only)
-----	--------------	-------------	-------------	-----------	-----------------------	---------------	-----------------------

562740	Air Travel for (4) To Reno for National Sheriff's Assoc Conference June 22, 2017 Leave June 29, 2017 Return *To Be Reimbursed from (310) fund * Inventory # 7252303400445
--------	---

#C
#b:

Signature: _____

James D. Smith

Sub-Total

Tax

Shipping

Total

5679



Reno

Jun 22, 2017 - Jun 29, 2017 | Itinerary # 7252303400445

Important Information

- Remember to bring your itinerary and government-issued photo ID for airport check-in and security.

Charlotte (CLT) → Reno (RNO)

CONFIRMED

Jun 22, 2017 - Jun 29, 2017, 4 round trip tickets

Your reservation is booked and confirmed. There is no need to call us to reconfirm this reservation.

Price Summary

Traveler 1: Adult	\$1,311.85
Flight	\$1,179.30
Taxes & Fees	\$132.55
Traveler 2: Adult	\$1,311.85
Flight	\$1,179.30
Taxes & Fees	\$132.55
Traveler 3: Adult	\$1,311.85
Flight	\$1,179.30
Taxes & Fees	\$132.55
Traveler 4: Adult	\$1,311.85
Flight	\$1,179.30
Taxes & Fees	\$132.55
Travel Protection	\$380.00
Total:	\$5,627.40

* Seat assignments, special meals, frequent flyer point awards and special assistance requests should be confirmed directly with the airline.

Jun 22, 2017 - Departure 1 stop

Total travel time: 7 h 59 m



Charlotte Chicago 2 h 12 m
 CLT 7:45am ORD 8:57am
 American Airlines 1916
 First (I) | Seat 03A, 03C, 03D, 03F | Confirm or change seats with the airline*



Chicago Reno 4 h

All prices quoted in US dollars.

Additional Flight Services

- The airline may charge additional fees for checked baggage or other optional services.

10
m

ORD 10:34am

RNO 12:44pm

American Airlines 2409

First (I) | Seat **05A, 05B, 05E, 05F** | Confirm or change seats
with the airline*

Jun 29, 2017 - Return 1 stop

Total travel time: 6 h 24 m

Reno

Phoenix

1 h 45 m

RNO 12:35pm

PHX 2:20pm

American Airlines 642

First (D) | Seat **02F, 02D, 01F, 01D** | Confirm or change seats
with the airline*

Layover: 0 h 31 m

Phoenix

Charlotte

4 h 8 m

PHX 2:51pm

CLT 9:59pm

American Airlines 623

First (D) | Seat **03C, 03A, 03F, 03D** | Confirm or change seats
with the airline*

Airline Rules & Regulations

- We understand that sometimes plans change. We do not charge a cancel or change fee. When the airline charges such fees in accordance with its own policies, the cost will be passed on to you.
- **Tickets are nonrefundable, nontransferable and name changes are not allowed.**
- Please read the complete penalty rules for changes and cancellations applicable to this fare.
- View the complete terms and the condition of the description of coverage.
- Please read important information regarding airline liability limitations.

Cancellation Plan

Jun 22, 2017 - Jun 29, 2017

PURCHASED

You have purchased the travel protection plan. Please refer to your itinerary number when calling to ask questions or file a claim.

Price Summary

Travel Protection \$380.00

Total: \$380.00

All prices quoted in US dollars.

Need help with your reservation?

- Visit our Customer Support page.



Name: ALEX UNDERWOOD
COUNTY OF CHESTER

PO BOX 1580
ROANOKE VA 24007-1580

Billing Cycle
Closing Date:
04/03/17

Account
Number: [REDACTED]

Account Summary

Beginning balance	\$597.62	Number of days in billing cycle	31
Payments and credits	1,049.38	Credit limit	10,000.00
Purchase and adjustments less refunds	5,890.54	Available credit	4,561.22
Cash advances	0.00	Available cash line	3,000.00
FINANCE CHARGES	0.00	Payment due date	04/28/17
Balance 04/03/17	\$5,438.78	NEW MINIMUM PAYMENT DUE	271.00

FOR INFORMATION PLEASE CALL: 888-514-6849
SEND INQUIRIES TO: FIRST CITIZENS BANK PO BOX 1580 ROANOKE VA 24007-1580

Page 1 of 4

TRANSACTIONS SINCE LAST STATEMENT

Trans	Post	Reference Number	Description	Amount
03/04	03/05	24692167063000838	UPS*293224DLA6C 800-811-1648 GA	204561 5.80 ✓
03/04	03/05	24692167063000838	UPS*1ZJT599U0300007615 800-811-1648 GA	204562 10.17 ✓
03/16	03/17	24692167075000239	EXPEDIA7252303400445 EXPEDIA.COM WA	204725 380.00
03/16	03/19	24431067076344900	AMERICAN AIR0017956565630FORT WORTH TX Dept Date: 06/22/17 Orig. Airport: CLT Dest. Airport: ORD Orig. Airport: ORD Dest. Airport: RNO Orig. Airport: RNO Dest. Airport: PHX Orig. Airport: PHX Dest. Airport: CLT	1,311.85 ↓
03/16	03/19	24431067076344900	AMERICAN AIR0017956565631FORT WORTH TX Dept Date: 06/22/17 Orig. Airport: CLT Dest. Airport: ORD Orig. Airport: ORD Dest. Airport: RNO Orig. Airport: RNO Dest. Airport: PHX Orig. Airport: PHX Dest. Airport: CLT	1,311.85 ↓
03/16	03/19	24431067076344900	AMERICAN AIR0017956565632FORT WORTH TX Dept Date: 06/22/17 Orig. Airport: CLT Dest. Airport: ORD Orig. Airport: ORD Dest. Airport: RNO Orig. Airport: RNO Dest. Airport: PHX Orig. Airport: PHX Dest. Airport: CLT	1,311.85 ↓
03/16	03/19	24431067076344900	AMERICAN AIR0017956565633FORT WORTH TX Dept Date: 06/22/17 Orig. Airport: CLT Dest. Airport: ORD Orig. Airport: ORD Dest. Airport: RNO Orig. Airport: RNO Dest. Airport: PHX	1,311.85 ↓

NOTICE: SEE REVERSE SIDE FOR IMPORTANT INFORMATION

\$5627.40



PO BOX 1580
ROANOKE VA 24007-1580

INDICATE CHANGE OF ADDRESS
ON BACK OF RETURN ENVELOPE.

MINIMUM PAYMENT DUE	PAST DUE AMOUNT	PAYMENT DUE DATE	NEW BALANCE
271.00	0.00	04/28/17	5,438.78

ACCOUNT
NUMBER
[REDACTED]

PLEASE WRITE IN
AMOUNT OF
PAYMENT ENCLOSED

\$ 5438.78

PROMPT CREDITING OF PAYMENTS: TO RECEIVE CREDIT FOR PAYMENT
AS OF THE DATE OF RECEIPT, WE MUST RECEIVE THIS PORTION OF THIS
STATEMENT AND YOUR CHECK OR MONEY ORDER BY 8:00AM.
USE ENCLOSED ENVELOPE AND MAKE PAYMENT TO

PLEASE DETACH AND ENCLOSE
THIS PORTION WITH PAYMENT.



FIRST CITIZENS BANK
PO BOX 63001
CHARLOTTE NC 28263-3001



ALEX UNDERWOOD
COUNTY OF CHESTER
1476 J A COCHRAN BYPASS
CHESTER SC 29706

**N0003112

Ve# 100913

TRANSACTIONS SINCE LAST STATEMENT

Trans	Post	Reference Number	Description	Amount
			Orig. Airport: PHX Dest. Airport: CLT	
03/22	03/22	00000110	PAYMENT RECEIVED -- THANK YOU	597.62-
03/27	03/29	24445007087200141	HOBBY LOBBY #383 ROCK HILL SC	204563 247.17 ✓
03/29	03/30	74755427088170884	EMBASSY KINGSTON PLANT MYRTLE BEACH SC CREDIT	refund 451.76-
			Purchase ID: 1020769	204564

TYPE OF BALANCE	MONTHLY PERIODIC RATE	CORRESPONDING ANNUAL PERCENTAGE RATE	AVERAGE DAILY BALANCE	PERIODIC FINANCE CHARGES
Purchases	0.721	8.65	0.00	0.00
Cash Advances	1.874	22.49	0.00	0.00

last month maybe

* Periodic Rate May Vary.

NOTE: See reverse side for Annual
Membership Fee disclosure.

Total Periodic FINANCE CHARGES:	\$0.00
Total Transaction Charges:	\$0.00
Total FINANCE CHARGES:	\$0.00
ANNUAL PERCENTAGE RATE:	0.000%

Embassy Kingston - 843-449-0006
Acctg Dept
4/11/17 - Esta Alban - lft msg.
front desk - copy of credit

- Jennifer
in Acctg
2/24 - charged
card

pd w/ check - # 128147 (3/17/17)
Ve# 100534

581-2741
Hope



Shipment Receipt

Transaction Date: 01 Mar 2017

Tracking Number:

1ZJT599U0300007615

1 Address Information

Ship To: [Redacted]	Ship From: Chester County Sheriff's Office 2740 Dawson Drive Chester SC 29706 Telephone: 8035815131 email: hbradley@chesterso.com	Return Address: Chester County Sheriff's Office [Redacted] 2740 Dawson Drive CHESTER SC 29706 Telephone: 8035815131 email: hbradley@chesterso.com
-------------------------------	---	--

2 Package Information

Weight	Dimensions / Packaging	Declared Value	Reference Numbers
1. 3.0 lbs (3.0 lbs billable)	Other Packaging		

3 UPS Shipping Service and Shipping Options

Service: UPS Ground Service
Guaranteed By: End of Day Monday, Mar 6, 2017
Shipping Fees Subtotal: 10.17 USD
Transportation: 10.17 USD

Additional Shipping Options

Quantum View Notify E-mail Notifications: No Charge
1 hbradley@chesterso.com: Ship, Exception, Delivery

4 Pickup Information

Pickup Address
Chester County Sheriff's Office
[Redacted]
2740 Dawson Drive
Chester SC 29706
Telephone: 8035815131 email: hbradley@chesterso.com
Earliest Pickup Time:
3/02/2017 9:00 A.M.
Latest Pickup Time:
3/02/2017 4:00 P.M.
Pickup Request Number:
\$293224DLA6C

Schedule a Pickup

Fuel Surcharge

Total Pickup Charges

5.80 USD

0.32 USD

6.12 USD

5 Payment Information

Bill Shipping and Pickup Charges: Visa xxxxxxxxxxxx9048

Shipping Charges:	10.17 USD ✓
Subtotal Shipping Charges:	10.17 USD
Subtotal Pickup Charges:	6.12 USD
Retail rates were applied to this shipment	
Total Charged:	16.29 USD

[REDACTED]

[REDACTED]

[REDACTED]
[REDACTED]

[REDACTED]

[REDACTED]

PURCHASE ORDER**BILL TO:**

Chester Co. Finance Dept
1476 J. A. Cochran By-Pass
Chester SC 29706

PURCHASE ORDER NO: 27457

This PO number must appear on all packages
and correspondence

Page 1 of 1

PHONE: (803) 385-2681

FAX: (803) 385-2945

VENDOR: 100913

FIRST CITIZENS BANK
P O BOX 63001
CHARLOTTE NC 28263-3001

SHIP TO:

Chester Co. Sheriffs Dept
2740 Dawson Drive
Chester SC 29706

(803) 581-5131

Notes to Vendor: ALL PACKING SLIPS AND INVOICES MUST HAVE PURCHASE ORDER NUMBER LISTED. PAYMENTS ARE NET 30.
PLEASE FORWARD A COPY OF YOUR SOUTH CAROLINA RESALE TAX CERTIFICATE TO
ACCOUNTSPAYABLE@CHESTERCOUNTY.ORG

Order Date: 03/02/2017

Date Required:

Ship Via:

Quantity	U/M	Catalog No	Description	Unit Price	Total
1.00			UPS Shipping to Return Item from [REDACTED]	16.2900	16.29
SubTotal					16.29
Sales Tax					0.00
Order Total					16.29

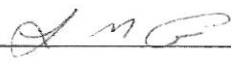
Requested By: Doug McMurray

Account Distribution

REVIEWED BY	APPROVED BY	ACCOUNT NUMBER	ACCOUNT DESCRIPTION	AMOUNT
SLANGLEY	SLANGLEY	100-301-5202	OPERATING SUPPLIES	16.29

QUESTIONS CONCERNING PURCHASE ORDERS SHOULD BE ADDRESSED TO THE CHESTER COUNTY PURCHASING OFFICE AT (803) 581-6268. Effective May 1, 2009 SALES TAX for Chester County is now 8%.

Authorized Signature: _____



PURCHASE ORDER**BILL TO:**

Chester Co. Finance Dept
1476 J. A. Cochran By-Pass
Chester SC 29706

DUPLICATE**PURCHASE ORDER NO: 27619**

This PO number must appear on all packages
and correspondence

Page 1 of 1

PHONE: (803) 385-2681

FAX: (803) 385-2945

VENDOR: 100913

FIRST CITIZENS BANK
P O BOX 63001
CHARLOTTE NC 28263-3001

SHIP TO:

Chester Co. Sheriff's Dept
2740 Dawson Drive
Chester SC 29706

(803) 581-5131

Notes to Vendor:

ALL PACKING SLIPS AND INVOICES MUST HAVE PURCHASE ORDER NUMBER LISTED. PAYMENTS ARE NET 30.
PLEASE FORWARD A COPY OF YOUR SOUTH CAROLINA RESALE TAX CERTIFICATE TO
ACCOUNTSPAYABLE@CHESTERCOUNTY.ORG

Order Date: 03/30/2017

Date Required:

Ship Via:

Quantity	U/M	Catalog No	Description	Unit Price	Total
1.00			(24) Custom Frame Receipt # S-383, T-2689 Purchased @ Hobby Lobby	231.0000	231.00
SubTotal					231.00
Sales Tax					18.48
Order Total					249.48

Requested By: Doug McMurray

Account Distribution

REVIEWED BY	APPROVED BY	ACCOUNT NUMBER	ACCOUNT DESCRIPTION	AMOUNT
SLANGLEY	SLANGLEY	100-301-5202	OPERATING SUPPLIES	249.48

QUESTIONS CONCERNING PURCHASE ORDERS SHOULD BE ADDRESSED TO THE CHESTER COUNTY PURCHASING OFFICE AT (803) 581-6268. Effective May 1, 2009 SALES TAX for Chester County is now 8%.

Authorized Signature: _____



HOBBY LOBBY.

Super Savings, Super Selection!

1526 Meeting Blvd.

Rock Hill, SC 29730

Hobby Lobby Store #383 (803) 327-5066

S-383 R-1 T-2689 BREANNA L SALE

110500000	Custom Frame	16.00
110500000	Custom Frame	10.00
110500000	Custom Frame	10.00
110500000	Custom Frame	2.50
110500000	Custom Frame	16.00
110500000	Custom Frame	10.00
110500000	Custom Frame	10.00
110500000	Custom Frame	2.50
110500000	Custom Frame	16.00
110500000	Custom Frame	10.00
110500000	Custom Frame	10.00
110500000	Custom Frame	2.50
110500000	Custom Frame	16.00
110500000	Custom Frame	10.00
110500000	Custom Frame	10.00
110500000	Custom Frame	2.50
110500000	Custom Frame	16.00
110500000	Custom Frame	10.00
110500000	Custom Frame	10.00
110500000	Custom Frame	2.50
110500000	Custom Frame	16.00
110500000	Custom Frame	10.00
110500000	Custom Frame	10.00
110500000	Custom Frame	2.50

SUBTOTAL 231.00

TAX TOTAL 16.17

TOTAL 247.17

VISA 247.17

AUTH#: 09423G

--Continued on Side 2--

--Side 2--

ACCT: VISA
VISA CREDIT
INSERTED
CARD [REDACTED] EXP **/**
REF # AUTH # RESP 00
152403271042 09423G ISO 00
AID: A0000000031010
TSI: 6800 ARC:00 CUR:0840
TVR: 8080008000
APP: VISA CREDIT
IAD: 06010A03A01000

Signature
CHANGE DUE 2.00

Number of Items Purchased: 24

Thank You. Please come again.
Become a fan on Facebook.
Return Policy on back of receipt

Visit our website at www.hobbylobby.com



3/27/17 03:22 PM

HOBBY LOBBY

Super Savings, Super Selection!

RETURN POLICY

Hobby Lobby values customer satisfaction; with or without the receipt.

With Original Sales Receipt:

Within 90 days of purchase we will gladly exchange the merchandise, give store credit or issue a refund based on the original method of payment. There will be a wait of 10 calendar days on check purchases, or merchandise credit can be issued.

Without Original Sales Receipt:

You may exchange the merchandise or be issued a merchandise credit based on the lowest selling price in the last 90 days. Valid ID is required.

We reserve the right to limit or refuse to accept the return of certain products and non-receipted items.

Thank you for shopping at Hobby Lobby.



HOBBY LOBBY

Hobby Lobby# 363 Phone# 327-5000
 Date Order Taken 3/11/17 Order # 9 of 4
 Order Taken By 18 Framed By VD
 Date Due 3/26/17
 Audited By _____

CUSTOMER INFORMATION

Customer Name _____ Primary Telephone _____ Secondary Telephone _____
 Address _____
 City _____ State _____ Zip _____

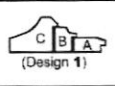
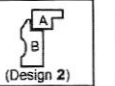
Artwork Description/Condition Thoroughly inspect the Artwork. Fill Out Completely and Check All That Apply

Office of Governor w/ signature

- | | | | |
|--|--|--|---|
| <input type="checkbox"/> Stains / Spots | <input type="checkbox"/> Acid Burn | <input type="checkbox"/> Tape / Tape Residue | <input checked="" type="checkbox"/> Nicks / Dents |
| <input type="checkbox"/> Mold / Mildew | <input type="checkbox"/> Fading / Color Shift | <input type="checkbox"/> Brittle / Scratched | <input type="checkbox"/> Smears |
| <input checked="" type="checkbox"/> Wrinkles / Creases | <input type="checkbox"/> Finger Prints | <input type="checkbox"/> Glued / Starched | <input type="checkbox"/> Moisture Damage |
| <input checked="" type="checkbox"/> Tears / Holes | <input type="checkbox"/> Crooked / Out of Square | <input type="checkbox"/> Rolled | <input type="checkbox"/> Flaking |

FRAMES / FILLETS

31 91 @ 50%

Custom # _____ Location # _____ **A**   \$ 16.00
 Stacked Custom # _____ Location # _____ \$ _____
 Readymade Mahogany Frame Size 11 x 14 \$ _____
 Customer's / Sectional _____ United Inches \$ _____
 Fillet / Strainer Bar # _____ Location # _____ \$ _____

MATS / FILLETS

1st Layer# 977 Color Name Midnight Location BG Width fit \$ 10.00
 2nd Layer# 968 Color Name Gold Location GS Width 1/4 \$ 10.00
 3rd Layer# _____ Color Name _____ Location _____ Width _____ \$ _____
 Special Design _____ (See diagram for layout) Window Opening 7 3/4 x 10 5/8 \$ _____

GLASS

☐ UV Regular ☐ UV Non Reflective ☐ Museum ☐ UV Acrylic ☐ Customer's ☐ No Glass \$ _____

MOUNTING

☐ Regular FCB ☐ Acid Free FCB ☐ Drymount ☐ Needleart/Canvas ☐ Shadowbox \$ _____

Authorization To Trim Artwork

Notes: _____

Customer Signature _____

By my signature, I authorize Hobby Lobby to trim my artwork to conform to the custom framing order set forth on this form.

OTHER / NOTES

p/h \$ 2.50

Note: The Customer assumes the risk and liability for any loss or damage upon delivery of artwork and acknowledges that the value of the property delivered to Hobby Lobby does not exceed \$250.00. Hobby Lobby's total liability for any loss or damage to customer's property shall not exceed \$250.00. Any items not picked up after 90 days from the due date will be deemed abandoned. All abandoned orders will be disassembled and the abandoned artwork will be discarded.

\$ 38.50
 Estimated Total Before Tax

Customer Signature _____

Pink: Customer

Visit hobbylobby.com to find custom frame sales and other great deals in your area!

HOBBY LOBBY

Hobby Lobby#	383	Phone#	327-566
Date Order Taken	3/14/17	Order	2 of 6
Order Taken By	LB	Framed By	40
Date Due	3/26/17		3/14/17
Audited By			

CUSTOMER INFORMATION

Customer Name: [Redacted]
Address: [Redacted]
Primary Telephone: [Redacted]
Secondary Telephone: [Redacted]

City: [Redacted] State: [Redacted] Zip: [Redacted]

Artwork Description/Condition: Thoroughly inspect the artwork. Fill Out Completely and Check All That Apply

Office of Sec of State

- | | | | |
|---|--|--|--|
| <input type="checkbox"/> Stains / Spots | <input type="checkbox"/> Acid Burn | <input type="checkbox"/> Tape / Tape Residue | <input type="checkbox"/> Puckers / Dents |
| <input type="checkbox"/> Mold / Mildew | <input type="checkbox"/> Fading / Color Shift | <input type="checkbox"/> Brittle / Scratched | <input type="checkbox"/> Smears |
| <input type="checkbox"/> Wrinkles / Creases | <input type="checkbox"/> Finger Prints | <input type="checkbox"/> Glued / Starched | <input type="checkbox"/> Moisture Damage |
| <input type="checkbox"/> Tears / Holes | <input type="checkbox"/> Crooked / Out of Square | <input type="checkbox"/> Rolled | <input type="checkbox"/> Flaking |

FRAMES / FILLETS

31% @ 50%

Custom # Location #

Stacked Custom # Location #

Readymade Mahog

Customer's / Sectional

Fillet / Strainer Bar # Location #

MATS / FILLETS

1st Layer# 977 Color Midnight BG Location 50 Width 14

2nd Layer# 968 Color Gold Location 45 Width 14

3rd Layer# Color Name Location Width

Special Design (See diagram for layout)

Window Opening 7 3/4 x 10 5/8

GLASS

UV Regular UV Non Reflective Museum UV Acrylic Customer's No Glass \$

MOUNTING

Regular FCB Acid Free FCB Drymount Needleart/Canvas Shadowbox \$

Authorization To Trim Artwork

Notes:

Customer Signature

By my signature, I authorize Hobby Lobby to trim my artwork to conform to the custom framing order set forth on this form.

OTHER / NOTES

p/h \$2.50

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\$ 38.50
Estimated Total Before Tax

Customer Signature

Yellow: File Pink: Customer

Visit hobbylobby.com to find custom frame sales and other great deals in your area!

HOBBY LOBBY

Hobby Lobby# 383 Phone# 327-5060
Date Order Taken 3/11/17 Order 4 of 0
Order Taken By LB Framed By YD
Date Due 3/26/17 3/18/17
Audited By _____

CUSTOMER INFORMATION

Customer Name _____ Primary Telephone _____ Secondary Telephone _____
Address _____
City _____ State _____ Zip _____

Artwork Description/Condition Thoroughly inspect the artwork, fill out completely and check all that apply

Honorable Alex Underwood

- | | | | |
|---|--|--|--|
| <input type="checkbox"/> Stains / Spots | <input type="checkbox"/> Acid Burn | <input type="checkbox"/> Tape / Tape Residue | <input type="checkbox"/> Puckers / Dents |
| <input type="checkbox"/> Mold / Mildew | <input type="checkbox"/> Fading / Color Shift | <input type="checkbox"/> Brittle / Scratched | <input type="checkbox"/> Smears |
| <input type="checkbox"/> Wrinkles / Creases | <input type="checkbox"/> Finger Prints | <input type="checkbox"/> Glued / Starched | <input type="checkbox"/> Moisture Damage |
| <input type="checkbox"/> Tears / Holes | <input type="checkbox"/> Crooked / Out of Square | <input type="checkbox"/> Rolled | <input type="checkbox"/> Flaking |

FRAMES / FILLETS

Custom # _____ Location # _____

Stacked Custom # _____ Location # _____

Readymade Mahog

Customer's / Sectional _____

Fillet / Strainer Bar # _____ Location # _____

Ignore the stack code for fillers & strainer bars. They should not be ordered as part of a stack.

MATS / FILLETS

Top Layer# 977 Color Midnight Location BG Width fit \$ 10.00

2nd Layer# 968 Color Gold Location G7 Width 1/4 \$ 10.00

3rd Layer# _____ Color _____ Location _____ Width _____ \$ _____

Special Design _____ (See diagram for layout) Window Opening 7 3/4 x 10 5/8 \$ _____

GLASS

☐ UV Regular ☐ UV Non Reflective ☐ Museum ☐ UV Acrylic ☐ Customer's ☐ No Glass \$ _____

MOUNTING

☐ Regular FCB ☐ Acid Free FCB ☐ Drymount ☐ Needleart/Canvas ☐ Shadowbox \$ _____

Authorization To Trim Artwork

Notes: _____

Customer Signature _____

By my signature, I authorize Hobby Lobby to trim my artwork to conform to the custom framing order set forth on this form.

OTHER / NOTES

p/h \$ 2.50

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\$ 38.50
Estimated Total Before Tax

Customer Signature _____

Yellow: File

Pink: Customer

Visit hobbylobby.com to find custom frame sales and other great deals in your area!

HOBBY LOBBY

Hobby Lobby# 383 Phone# 327-5066
Date Order Taken 3/11/17 Order 1 of 10
Order Taken By LB Framed By CD
Date Due 3/20/17 3/21/17
Audited By _____

CUSTOMER INFORMATION

Customer Name [REDACTED] Primary Telephone [REDACTED] Secondary Telephone [REDACTED]

Address Refused

Address _____

City _____ State _____ Zip _____

Artwork Description/Condition Thoroughly inspect the Artwork. Fill Out Completely and Check All That Apply

Office of Sec. of State

- | | | | |
|---|--|--|--|
| <input type="checkbox"/> Stains / Spots | <input type="checkbox"/> Acid Burn | <input type="checkbox"/> Tape / Tape Residue | <input type="checkbox"/> Puckers / Dents |
| <input type="checkbox"/> Mold / Mildew | <input type="checkbox"/> Fading / Color Shift | <input type="checkbox"/> Brittle / Scratched | <input type="checkbox"/> Smears |
| <input type="checkbox"/> Wrinkles / Creases | <input type="checkbox"/> Finger Prints | <input type="checkbox"/> Glued / Starched | <input type="checkbox"/> Moisture Damage |
| <input type="checkbox"/> Tears / Holes | <input type="checkbox"/> Crooked / Out of Square | <input type="checkbox"/> Rolled | <input type="checkbox"/> Flaking |

FRAMES / FILLETS

Custom # _____ Location # _____

Stacked Custom # _____ Location # _____

Readymade Mahogany

Customer's / Sectional _____

Fillet / Strainer Bar # _____ Location # _____

MATS / FILLETS

Top Layer# 977 Color Name Midnight Location 50 Width fit

2nd Layer# 968 Color Name Gold Location 93 Width 1/4

3rd Layer# _____ Color Name _____ Location _____ Width _____

Special Design _____ (See diagram for layout)

Window Opening 7 3/4 x 10 5/8

GLASS

☐ UV Regular ☐ UV Non Reflective ☐ Museum ☐ UV Acrylic ☐ Customer's ☐ No Glass \$ _____

MOUNTING

☐ Regular FCB ☐ Acid Free FCB ☐ Drymount ☐ Needleart/Canvas ☐ Shadowbox \$ _____

Authorization To Trim Artwork

Notes: _____

Customer Signature _____

By my signature, I authorize Hobby Lobby to trim my artwork to conform to the custom framing order set forth on this form.

OTHER / NOTES

p/h \$2.50

Note: The Customer assumes the risk and liability for any loss or damage upon delivery of artwork and acknowledges that the value of the property delivered to Hobby Lobby does not exceed \$250.00. Hobby Lobby's total liability for any loss or damage to customer's property shall not exceed \$250.00. Any items not picked up after 90 days from the due date will be deemed abandoned. All abandoned orders will be discarded and the abandoned artwork will be discarded.

\$ 38.50
Estimated Total Before Tax

Customer Signature [REDACTED]

Yellow: For _____ Pink: Customer

Visit hobbylobby.com to find custom frame sales and other great deals in your area!

HOBBY LOBBY

Hobby Lobby# 383 Phone# 327-5666
Date Order Taken 3/11/17 Order 3 of 6
Order Taken By LB Framed By 40
Date Due 3/26/17 3/24/17
Audited By _____

CUSTOMER INFORMATION

Customer Name [Redacted] Primary Telephone [Redacted] Secondary Telephone [Redacted]
Address [Redacted]
City _____ State _____ Zip _____

Artwork Description/Condition Office of Secretary of State Thoroughly inspect the artwork. Fill out completely and check all that apply.

- | | | | |
|--|--|--|---|
| <input type="checkbox"/> Stains / Spots | <input type="checkbox"/> Acid Burn | <input type="checkbox"/> Tape / Tape Residue | <input checked="" type="checkbox"/> Puckers / Dents |
| <input type="checkbox"/> Mold / Mildew | <input type="checkbox"/> Fading / Color Shift | <input type="checkbox"/> Brittle / Scratched | <input type="checkbox"/> Smears |
| <input checked="" type="checkbox"/> Wrinkles / Creases | <input type="checkbox"/> Finger Prints | <input type="checkbox"/> Glued / Starched | <input type="checkbox"/> Moisture Damage |
| <input type="checkbox"/> Tears / Holes | <input type="checkbox"/> Crooked / Out of Square | <input type="checkbox"/> Rolled | <input type="checkbox"/> Flaking |

FRAMES / FILLETS

Custom # _____ Location # _____ A 399 @ 50%
Stacked Custom # _____ Location # _____
Readymade Mahog Frame Size 11 x 14 \$ 16.00
Customer's / Sectional _____ United Inches \$ _____
Fillet / Strainer Bar # _____ Location # _____
Ignore the stock code for filllets & strainer bars. They should not be ordered as part of a pack.

MATS / FILLETS

Top Layer# 977 Color Midnight Location 58 Width for \$ 10.00
2nd Layer# 968 Color Gold Location 67 Width 1/4 \$ 10.00
3rd Layer# _____ Color _____ Location _____ Width _____
Special Design _____ (See diagram for layout) Window Opening 7 3/4 x 10 5/8 \$ _____

GLASS

☐ UV Regular ☐ UV Non Reflective ☐ Museum ☐ UV Acrylic ☐ Customer's ☐ No Glass \$ _____

MOUNTING

☐ Regular FCB ☐ Acid Free FCB ☐ Drymount ☐ Needleart/Canvas ☐ Shadowbox \$ _____

Authorization To Trim Artwork

Notes: _____

Customer Signature _____

By my signature, I authorize Hobby Lobby to trim my artwork to conform to the custom framing order set forth on this form.

OTHER / NOTES

\$ 2.50
\$ _____
\$ _____
\$ _____
\$ _____
\$ _____

Note: The Customer assumes the risk and liability for any loss or damage upon delivery of artwork and acknowledges that the value of the property delivered to Hobby Lobby does not exceed \$250.00. Hobby Lobby's total liability for any loss or damage to customer's property shall not exceed \$250.00. Any items not picked up after 90 days from the due date will be deemed abandoned. All abandoned orders will be disassembled and the abandoned artwork will be discarded.

\$ 38.50 Customer Signature [Redacted]
Estimated Total Before Tax

Visit hobbylobby.com to find custom frame sales and other great deals in your area!

HOBBY LOBBY

Hobby Lobby# 383 Phone# 327-5066
Date Order Taken 3/11/17 Order 6 of 6
Order Taken By LB Framed By LB
Date Due 3/26/17 3/19/17
Audited By _____

CUSTOMER INFORMATION

Customer Name _____ Secondary Telephone _____

Address _____
Address _____

City _____ State _____ Zip _____

Artwork Description/Condition Thoroughly inspect the artwork. Fill out completely and check all that apply

Cert of Appreciation

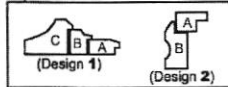
- | | | | |
|--|--|--|---|
| <input type="checkbox"/> Stains / Spots | <input type="checkbox"/> Acid Burn | <input type="checkbox"/> Tape / Tape Residue | <input checked="" type="checkbox"/> Puckers / Dents |
| <input type="checkbox"/> Mold / Mildew | <input type="checkbox"/> Fading / Color Shift | <input type="checkbox"/> Brittle / Scratched | <input type="checkbox"/> Smears |
| <input checked="" type="checkbox"/> Wrinkles / Creases | <input type="checkbox"/> Finger Prints | <input type="checkbox"/> Glued / Starched | <input type="checkbox"/> Moisture Damage |
| <input type="checkbox"/> Tears / Holes | <input type="checkbox"/> Crooked / Out of Square | <input type="checkbox"/> Rolled | <input type="checkbox"/> Flaking |

FRAMES / FILLETS

3/19 @ 50%

Custom # _____ Location # _____

Design Top 2 Mounting



\$16.00

Stacked Custom # _____ Location # _____

Readymade Mahogany

Frame Size 11 x 14

\$ -

Customer's / Sectional _____

United Inches _____

\$ -

Fillet / Strainer Bar # _____ Location # _____

MATS / FILLETS

Top Layer# 3340 Color Name Natso Location _____ Width _____

\$10.00

2nd Layer# 977 Color Name Midnight Location _____ Width _____

\$10.00

3rd Layer# _____ Color Name _____ Location _____ Width _____

Window Opening 8 1/4 x 10 3/4

\$ -

Special Design _____ (See diagram for layout)

\$ -

GLASS

☐ UV Regular ☐ UV Non Reflective ☐ Museum ☐ UV Acrylic ☐ Customer's ☐ No Glass \$ -

MOUNTING

☐ Regular FCB ☐ Acid Free FCB ☐ Drymount ☐ Needleart/Canvas ☐ Shadowbox \$ -

Authorization To Trim Artwork

Notes: _____

OTHER / NOTES

p/h \$250

Customer Signature _____

By my signature, I authorize Hobby Lobby to trim my artwork to conform to the custom framing order set forth on this form.

Note: The Customer assumes the risk and liability for any loss or damage upon delivery of artwork and acknowledges that the value of the property delivered to Hobby Lobby does not exceed \$250.00. Hobby Lobby's total liability for any loss or damage to customer's property shall not exceed \$250.00. Any items not picked up after 90 days from the due date will be deemed abandoned. All abandoned orders will be disassembled and the abandoned artwork will be discarded.

\$ 38.50
Estimated Total Before Tax

Customer Signature _____

Yellow: File

Pink: Customer

Renee Holley

From: Jennifer Compton <Jennifer.Compton@Hilton.com>
Sent: Tuesday, April 11, 2017 11:53 AM
To: Renee Holley
Subject: Underwood Refund Screenshot 88105878
Attachments: Underwood Refund Screenshot 88105878.docx

Ms. Holley ~

Please find attached the screenshot for Mr. Underwood's reservation that shows the following:

- Original Advance Deposit charged to Visa ending in 9048 on 2/24/17 for \$451.76
- Refund posted to Visa *9048 on 3/28/17 for \$451.76
- Check #128147 posted for \$2,258.79 on 3/28/17

Please note that if a refund is for the exact amount of the charge, our system will no longer print it out on a receipt. However, the screenshot does show the original charge and the refund. Please note that our reservation system posts payments/deposits as a negative and refunds as a positive; however, room/miscellaneous charges post the opposite – charges are positives and refunds/credits are negative. Please allow 3 – 5 business days for the refund to appear in your account.



Please let me know if I can do anything else for you or if you have any questions.

Thank you and have a great day!

Jennifer Compton
Accounting Clerk

Kingston Resorts

Hilton  Myrtle Beach Resort -  Royale Palms at Kingston Shores

Embassy Suites  Myrtle Beach Oceanfront - Kingston Plantation Condo Company 

9800 Queensway Blvd | Myrtle Beach, SC 29572 | USA

T: 843.497.2405 | F: 843.497.1730 | E: Jennifer.Compton@hilton.com

kingstonresorts.com | facebook.com/kingstonresorts | twitter.com/kingstonresorts

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Name: ALEX UNDERWOOD
COUNTY OF CHESTER

PO BOX 1580
ROANOKE VA 24007-1580

Billing Cycle
Closing Date:
03/03/17

Account
Number [REDACTED]

Account Summary

Beginning balance	\$330.11	Number of days in billing cycle	28
Payments and credits	330.11	Credit limit	10,000.00
Purchase and adjustments less refunds	597.62	Available credit	9,402.38
Cash advances	0.00	Available cash line	3,000.00
FINANCE CHARGES	0.00	Payment due date	03/28/17
Balance 03/03/17	\$597.62	NEW MINIMUM PAYMENT DUE	29.00

FOR INFORMATION PLEASE CALL: 888-514-6849

SEND INQUIRIES TO: FIRST CITIZENS BANK PO BOX 1580 ROANOKE VA 24007-1580

Page 1 of 2

TRANSACTIONS SINCE LAST STATEMENT

Trans	Post	Reference Number	Description	Amount
02/14	02/14	00000068	PAYMENT RECEIVED -- THANK YOU	330.11-
02/15	02/17	24001757047286512	SC.GOV 803-771-0131 SC Order Date: 02/15/17	126.00
02/25	02/26	24755427056260563	EMBASSY KINGSTON PLANT MYRTLE BEACH SC	451.76
02/25	02/26	24692167056000256	UPS*2921P1KJEFD 800-811-1648 GA	6.90
02/25	02/26	24692167056000256	UPS*1ZJT15Z0P900028217 800-811-1648 GA	12.96

TYPE OF BALANCE	MONTHLY PERIODIC RATE	CORRESPONDING ANNUAL PERCENTAGE RATE	AVERAGE DAILY BALANCE	PERIODIC FINANCE CHARGES
Purchases	0.721	8.65	0.00	0.00
Cash Advances	1.874	22.49	0.00	0.00

* Periodic Rate May Vary.

NOTE: See reverse side for Annual

Membership Fee disclosure.

Total Periodic FINANCE CHARGES: \$0.00

Total Transaction Charges: \$0.00

Total FINANCE CHARGES: \$0.00

ANNUAL PERCENTAGE RATE: 0.000%

NOTICE: SEE REVERSE SIDE FOR IMPORTANT INFORMATION



9800 Queensway Boulevard, Myrtle Beach, South Carolina, 29572, USA
+1-843-282-3222

Reservation Confirmation # 88105878

Hotel

Kingston Plantation Condos
9800 Queensway Boulevard
Myrtle Beach, South Carolina 29572
USA
Phone: +1-843-282-3222

[Maps and directions, Local guide](#)

Room and Plan Selection

Room:
2 adults, 2 children
~~1 BEDROOM OCEANFRONT CONDO-RED VAPES~~
Price (5 nights x 389.00) 1,945.00
Room Subtotal 1,945.00
Resort charge: 89.95
Taxes 223.84
[Best Available Rate](#)

Total for stay: \$2,258.79 USD

Stay Information

Arrival: Saturday, 08 Jul 2017
Departure: Thursday, 13 Jul 2017
1 room for 5 nights

Early check-in cannot be guaranteed. Contact the hotel to inquire about early check-in or late check-out. Hotel check-in time is 4:00 pm and check-out is at 11:00 am.

Guest Information

Guest name: Alex Underwood
Additional Guests:
Address type: Home
Address: On file
Email: On file
Phone: On file

Payment Information

Card type: Visa
Card number: *****9048
Expiration: May 2019

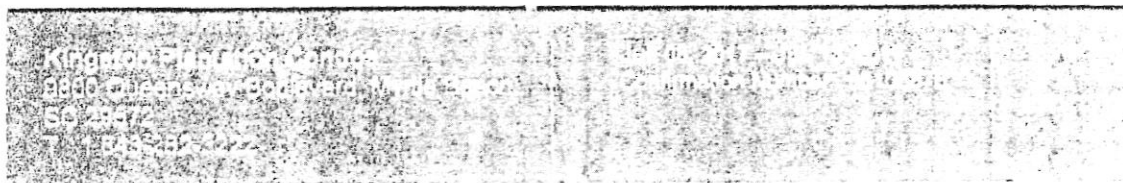
389.00 (451.76)

1 bedroom (King size) -
King suite - 399.00 462.85 per night

27449
100-301-5207

Hope Bradley

From: Embassy Suites by Hilton Confirmed <embassysuitesbyhilton@res.hilton.com>
Sent: Friday, February 24, 2017 9:47 AM
To: Hope Bradley
Subject: Your 08 Jul 2017 Confirmation #88105878



*Alex
Underwood.*
My name is Alex.



ALLEN WILSON
ENJOY A SPECIAL ROOM
UPGRADE FOR ONLY



Your Room Information

2 BDRM OCEANFRONT CONDO

Rooms: 1

Guests: 2 Adults 2 Children

Check In: Jul 08 4:00 PM

Check Out: Jul 13 11:00 AM

Your Rate Information

Rate per night : 389.00 USD

Total for Stay per Room

Rate: 1,945.00 USD

Resort Charge : 89.95 USD

Taxes: 223.84 USD

Total: 2,258.79 USD

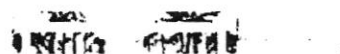
Total for Stay : 2,258.79 USD

Get what you want, for as long as you want it



ALLEN WILSON is a leading provider of high-quality, custom-made mechanical components and assemblies. Our expertise spans a wide range of industries, from aerospace to medical devices. We offer a full range of services, including design, prototyping, and production. Our state-of-the-art facilities and experienced team ensure that every project is completed to the highest standards of precision and quality.

ALLEN WILSON
2000 W. 10th Ave. Suite 100
Denver, CO 80202
Phone: (303) 733-1111
Fax: (303) 733-1112
www.allenwilson.com



ADDITIONAL INFORMATION:

Tax:





















- 11.00% per room per night

Resort Charges:

- There is a 89.95 USD Resort Charge
- Daily Resort Charge will be added to the room rate and includes: Guest internet access, parking; Shuttle service throughout the resort to 2 mile radius outside resort; 1 hr of Tennis/Racquetball Court time per day; Splash park and Health club access; Children's activities, local and toll free calls
- Self parking: 0.00/night

RATE RULES AND CANCELLATION POLICY:

- Please contact us should you need to cancel your reservation
- Cancellations are required by 4PM on Jul 01, 2017 local hotel time to avoid cancellation penalties
- Your reservation is guaranteed by a deposit 1451.76 USD that has been/will be charged to your credit card
- No motorcycles, RV's, boats or trailers allowed on this property
- Pets are not permitted
- Barbecue grilling of any type is not permitted
- Maximum unit occupancy strictly enforced: 1-Bedroom (4 people), 2-Bedroom (6 people), 3-Bedroom (8 people), 4-Bedroom (10 people)
- Complimentary breakfast and evening beverages NOT included in condo rentals



VENDOR (100534) EMBASSY SUITES, MYRTLE BEACH

CHECK DATE	CHECK NUMBER	PAGE
03/17/2017	128147	1 OF 1

INVOICE NUMBER	INVOICE DATE	PO NUMBER	ACCOUNT NUMBER	DESCRIPTION	INVOICE AMOUNT
CON#88105878	03/17/17	27449	100-301-5207	SHERIFF'S ASSOCIATION-ALEX UNDEI	2,258.79

2,258.79

CHESTER COUNTY
P.O. Box 580
CHESTER, SC 29706

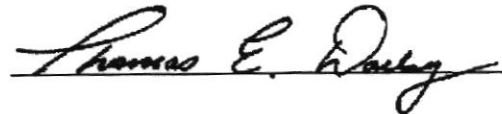
FIRST CITIZENS BANK
CHESTER, SC 29706
67-148/532

128147

DATE	AMOUNT
03/17/2017	*****2,258.79

PAY TWO THOUSAND TWO HUNDRED FIFTY-EIGHT AND 79 / 100

TO THE ORDER OF EMBASSY SUITES, MYRTLE BEACH
9800 QUEENS WAY BLVD
MYRTLE BEACH, SC 29572



County of Chester
Operating Account
PO Drawer 686
Chester, SC 29706

EMBASSY SUITES, MYRTLE BEACH
9800 QUEENS WAY BLVD
MYRTLE BEACH, SC 29572

PURCHASE ORDER**BILL TO:**

Chester Co. Finance Dept
1476 J. A. Cochran By-Pass
Chester SC 29706

PURCHASE ORDER NO: 27449

This PO number must appear on all packages
and correspondence

Page 1 of 1

PHONE: (803) 385-2681

FAX: (803) 385-2945

VENDOR: 100534

EMBASSY SUITES, MYRTLE BEACH
9800 QUEENS WAY BLVD
MYRTLE BEACH SC 29572

SHIP TO:

Chester Co. Sheriffs Dept
2740 Dawson Drive
Chester SC 29706

(803) 581-5131

Notes to Vendor:

ALL PACKING SLIPS AND INVOICES MUST HAVE PURCHASE ORDER NUMBER LISTED. PAYMENTS ARE NET 30.
PLEASE FORWARD A COPY OF YOUR SOUTH CAROLINA RESALE TAX CERTIFICATE TO
ACCOUNTSPAYABLE@CHESTERCOUNTY.ORG

Order Date: 03/01/2017

Date Required:

Ship Via:

Quantity	U/M	Catalog No	Description	Unit Price	Total
1.00			Hotel Reservation for : 2017 S.C. Sheriff's Association Attendee : Alex Underwood Arrival Date : 7/8/17 Departure Date : 7/13/17 Confirmation # 88105878 ** Taxes and Fees Included **	2,258.7900	2,258.79

SubTotal	2,258.79
Sales Tax	0.00
Order Total	2,258.79

Requested By: Doug McMurray

Account Distribution

REVIEWED BY	APPROVED BY	ACCOUNT NUMBER	ACCOUNT DESCRIPTION	AMOUNT
SLANGLEY	SLANGLEY	100-301-5207	PROFESSIONAL DEVELOP	2,258.79

QUESTIONS CONCERNING PURCHASE ORDERS SHOULD BE ADDRESSED TO THE CHESTER COUNTY PURCHASING OFFICE AT (803) 581-6268. Effective May 1, 2009 SALES TAX for Chester County is now 8%.

Authorized Signature: _____

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